



STATE OF NEW HAMPSHIRE
Lobbyists Report of
Political Contributions
Addendum C
(RSA Chapter 15:6)

P I. Name of Lobbyist(s) ROBERT J. SCOLLEY

L

E II. Name of lobbyist's partnership, firm or corporation, if any:

A

S N.H. MOTOR TRANSPORT ASSOCIATION

E (Name of partnership, firm or corporation)

P III. Name of Client NH MOTOR TRANSPORT ASSN Date 4-24-17

R

I Political Contributions

N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the

T client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: FELTES DAN
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking STATE SENATE

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: BLELIXESSY MARIE
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking STATE SENATE

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: COMMITTEE TO ELECT HARRY REEDRUMS
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 1,000.00 Office Candidate is Seeking _____

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APR 25 2017

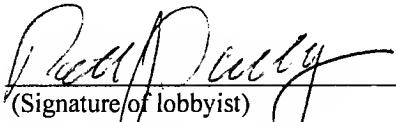
NEW HAMPSHIRE
DEPARTMENT OF STATE

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

(If more than three contributions were made, report additional contributions on separate addendum C forms.)

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.


(Signature of lobbyist)

4-24-17
(Date)

ROBERT J. SCULLEY
(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

P I. Name of Lobbyist(s) ROBERT J. SCULLEY

L
E II. Name of lobbyist's partnership, firm or corporation, if any:

A
S N.H. MOTOR TRUCK ASSOCIATION
E (Name of partnership, firm or corporation)

P III. Name of Client ANTIQUE TRAILER ASSN Date 4-24-17

R

I Political Contributions

N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the

T client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: HSKY BETTY
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking STATE SENATE

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: WATKINS DAVID
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking STATE SENATE

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: WADDELL JEFF
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking STATE SENATE

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APR 25 2017

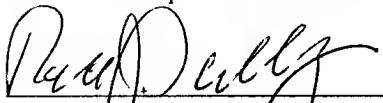
NEW HAMPSHIRE
DEPARTMENT OF STATE

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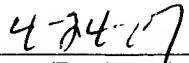
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Sworn Statement/Affirmation by Lobbyist

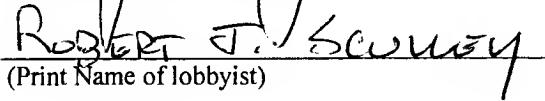
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.



(Signature of lobbyist)



(Date)



(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE
Lobbyists Report of
Political Contributions
Addendum C
(RSA Chapter 15:6)

P I. Name of Lobbyist(s) ROBERT J. SCULLEY
L
E II. Name of lobbyist's partnership, firm or corporation, if any:
A
S N.H. MOTOR TRANSPORT ASSOCIATION
E (Name of partnership, firm or corporation)

P III. Name of Client N.H. MOTOR TRANSPORT ASSN Date 4-24-17
R
I Political Contributions
N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the
T client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: AVAIL REVILLE
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking STATE SENATE

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: BUDSALL REGINA
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking STATE SENATE

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: EVANS WILLIAM
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking STATE SENATE

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APR 25 2017

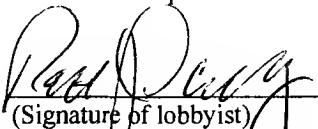
**NEW HAMPSHIRE
DEPARTMENT OF STATE**

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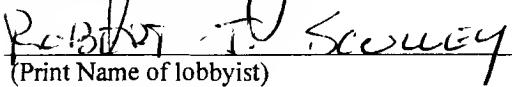
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Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.


(Signature of lobbyist)

4-34-17
(Date)


(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

P I. Name of Lobbyist(s) ROBERT J. SCOLLEY

L E. II. Name of lobbyist's partnership, firm or corporation, if any:

A S NH MOTOR TRANSPORT ASSOCIATION
E (Name of partnership, firm or corporation)

P III. Name of Client NH Motor Transport Assoc. Date 1-24-17

R

I. Political Contributions

N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the
T client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: LEWIS DAN
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking STATE SENATE

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: LEWIS ROBERT
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking STATE SENATE

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: _____
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ _____ Office Candidate is Seeking _____

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APR 25 2017

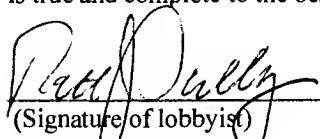
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Sworn Statement/Affirmation by Lobbyist

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(Signature of lobbyist)

4-24-17
(Date)

ROBERT J. SCULLEY
(Print Name of lobbyist)